10/26/2016 10 : 19

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### FEC FORM 5

#### REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation HUMANE SOCIETY LEGISLATIVE FUND  (i) Address (number and street)		a by Forestic (cure, man, one committees)	7			
1255 23rd Street, NW Suit 4155  (c) City, State and ZIP Code Washington  DC 20037-1525  2. Occupation and Name of Employer (for Individual Filers Only)  4. TYPE OF REPORT (check appropriate boxes):  (a) April 15 Quarterly Report July 15 Quarterly Report July 15 Quarterly Report January 31 Year-End Report  5. COVERING PERIOD: FROM 10 24 24 2016 THROUGH 10 25 2016  6. TOTAL CONTRIBUTIONS	1. (a) Nam	ne of Individual, Organization or Corporation IE SOCIETY LEGISLATIVE FUND				
Washington DC 20037-1525  2. Occupation and Name of Employer (for Individual Filers Only)  4. TYPE OF REPORT (check appropriate boxes):  (a) April 15 Quarterly Report  July 15 Quarterly Report  October 15 Quarterly Report  January 31 Year-End Report  b) Is this Report an amendment? No Yes, it amends the report filed on THE PROPERTOR OF THE PROP	1255 2	23rd Street, NW				
Washington DC 20037-1525  C C90009358  4. TYPE OF REPORT (check appropriate boxes):  (a) April 15 Quarterly Report  July 15 Quarterly Report  October 15 Quarterly Report  January 31 Year-End Report  b) Is this Report an amendment? X No Yes, it amends the report filed on THROUGH  10 / 24 / 2016  THROUGH  10 / 25 / 2016  6. TOTAL CONTRIBUTIONS	(c) City,	State and ZIP Code	2. FEC Identification Number			
4. TYPE OF REPORT (check appropriate boxes):  (a) April 15 Quarterly Report  July 15 Quarterly Report  October 15 Quarterly Report  January 31 Year-End Report  b) Is this Report an amendment? IN NO Yes, it amends the report filed on THROUGH  THROUGH  5. COVERING PERIOD:  FROM 10 / 24 / 2016  THROUGH  THROUGH  THROUGH  TO TOTAL CONTRIBUTIONS	Washir	ngton DC 20037-1525	3. FEC Identification Number			
4. TYPE OF REPORT (check appropriate boxes):  (a) April 15 Quarterly Report  July 15 Quarterly Report  October 15 Quarterly Report  January 31 Year-End Report  b) Is this Report an amendment? IN NO Yes, it amends the report filed on THROUGH  THROUGH  5. COVERING PERIOD:  FROM 10 / 24 / 2016  THROUGH  THROUGH  THROUGH  TO TOTAL CONTRIBUTIONS			C C90009358			
(a) April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report January 31 Year-End Report  b) Is this Report an amendment? No Yes, it amends the report filed on  5. COVERING PERIOD: FROM 10 24 24 2016 THROUGH 10 25 25 2016  C. TOTAL CONTRIBUTIONS	2. Occupa	ttion and Name of Employer (for Individual Filers Only)	0 03003330			
January 31 Year-End Report  b) Is this Report an amendment?  No Yes, it amends the report filed on		(a) April 15 Quarterly Report  July 15 Quarterly Report  24-Hour Report				
b) Is this Report an amendment? X No Yes, it amends the report filed on  5. COVERING PERIOD: FROM 10 24 2016  THROUGH 10 25 2016  6. TOTAL CONTRIBUTIONS						
7. TOTAL INDEPENDENT EXPENDITURES	5	5. COVERING PERIOD: FROM 10 / 24 / 2016				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.  TYPE OR PRINT NAME OF PERSON COMPLETING FORM  SIGNATURE  [Electronically Filed]  Amundson, Sara, , , 10/26/2016						
TYPE OR PRINT NAME OF PERSON COMPLETING FORM  SIGNATURE  [Electronically Filed]  Amundson, Sara, , ,  10/26/2016	/	TOTAL INDEPENDENT EXPENDITURES	513321.56			
Amundson, Sara, , ,   Amundson, Sara, , ,   10/26/2016			or concert with, or at the request or suggestion			
10/26/2016	TYPE OR I					
	Amundson, Sara, , , Amundson, Sara, , ,		10/26/2016			

#### : 97 'A = G7 9 @ G5 B9 CI G'H9 LH F9 @ 5 H98 'HC' 5 'F9 DCF Hz G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F5N Transaction ID:

Humane Society Legislative Fund received no contributions made for the purpose of furthering an independent expenditure and the source of funding was general treasury funds of Humane Society Legislative Fund, therefore no contributions are reported on Line 6 or Schedule 5-A

Form/Schedule: Transaction ID:

# SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 3 OF 6 FOR LINE 7 OF FORM 5

AME OF FILER (In Full)		•
HUMANE SOCIETY LEGISLATIVE FUND		
Town Marca // cot First Middle Initial) of Day		
Full Name (Last, First, Middle Initial) of Pay Humane Society Legislative Fund	/ee	Date of Public Distribution/Dissemination
Mailing Address 1255 23rd Street, NW		10 24 2016
Ste 455		Amount
City	State Zip Code	153.92
Washington	DC 20037-1125	Transaction ID : A3333694C7EFA4830992
Purpose of Expenditure Staff travel for Door-Knocking Campaign	Category/ Type	Office Sought: X House State: NJ Senate District: 05
Name of Federal Candidate Supported or C Gottheimer, Josh, , ,	Opposed by Expenditure:	President  Check One:  Support  Oppose
Calendar Year-To-Date Per Election for Office Sought	45042.26	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Pay	yee	Date of Public Distribution/Dissemination
Humane Society Legislative Fund		10 / 25 / 2016
Mailing Address 1255 23rd Street, NW		
Ste 455		Amount
City	State Zip Code	54.49
Washington	DC 20037-1125	Transaction ID : AE97F44A4CCA74DF5BF
Purpose of Expenditure Staff time for mailer review	Category/ Type	Office Sought: House State: NJ Senate 05
Name of Federal Candidate Supported or ( Gottheimer, Josh, , ,	Opposed by Expenditure:	President District:  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	47206.75	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Pay	vee	Date of Public Distribution/Dissemination
Humane Society Legislative Fund		M = M / D = D / Y = Y = Y
Mailing Address 1255 23rd Street, NW		10 25 2016
Ste 455		Amount
City	State Zip Code	61.60
Washington	DC 20037-1125	Transaction ID : AA4DE4DDB61144CE19I
Purpose of Expenditure	Category/	Office Sought: House State: WI
Staff time for Advertising Review	Type	Senate District:
Name of Federal Candidate Supported or (Feingold, Russell, Dana, ,	Opposed by Expenditure.	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	399390.78	Disbursement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Ex	xpenditures	270.01
(b) SUBTOTAL of Unitemized Independent	Expenditures	
(c) TOTAL Independent Expenditures(carry total from last page forward		··············

# SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF FILER (In Full) HUMANE SOCIETY LEGISLATIVE FUND Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination Humane Society Legislative Fund 10 25 2016 Mailing Address 1255 23rd Street, NW Amount Ste 455 Zip Code City State 311.00 Washington DC 20037-1125 Transaction ID: AB63F36DB2C794D19B74 Purpose of Expenditure Office Sought: ✗ House Category/ State: Staff travel for Door-Knocking Campaign Senate 04 District: President Name of Federal Candidate Supported or Opposed by Expenditure: Kihuen, Ruben, . . X Check One: Support Oppose ✗ General Disbursement For: Primary Calendar Year-To-Date Per Election 2016 48566.43 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination Humane Society Legislative Fund 10 25 2016 Mailing Address 1255 23rd Street, NW Amount Ste 455 City State Zip Code 219.00 Washington DC 20037-1125 Transaction ID: A19462339A67C4FBC9E1 NVPurpose of Expenditure Office Sought: House X Category/ State: Staff time for Door-Knocking Campaign Type Senate 04 District: President Name of Federal Candidate Supported or Opposed by Expenditure: Kihuen, Ruben, , , Check One: Support Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 48566.43 2016 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination Joe Trippi & Associates 2016 10 25 Mailing Address 606A N. Talbot Street Amount Ste. #203 City State Zip Code 109845.13 MD 21663-2110 St Michaels Transaction ID: A38B30A514548427F8D6 Purpose of Expenditure Office Sought: House DC Category/ State: Television Advertising Type Senate 00 District: President Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, J.,, **X** Oppose Check One: Support Disbursement For: 2016 Primary General Calendar Year-To-Date Per Election 170465.56 for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 110375.13 (b) SUBTOTAL of Unitemized Independent Expenditures ...... (c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)

## SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE	5	OF	6
FOR LI	VF 7 (	OF FOI	RM 5

NAME OF FILER (In Full) HUMANE SOCIETY LEGISLATIVE FUND Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination Moxie Media 10 25 2016 Mailing Address P.O. Box 30084 Amount Zip Code City State 1650.00 Seattle WA 98113-2084 Transaction ID: ADC2CECE925D641A8BB Purpose of Expenditure NJ Office Sought: ✗ House Category/ State: Walk Piece Production Type Senate 05 District: President Name of Federal Candidate Supported or Opposed by Expenditure: Gottheimer, Josh, , , X Check One: Support Oppose ✗ General Disbursement For: Primary Calendar Year-To-Date Per Election 2016 47206.75 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination Joe Trippi & Associates 10 25 2016 Mailing Address 606A N. Talbot Street Ste. #203 Amount City State Zip Code 399329.18 St Michaels MD 21663-2110 Transaction ID: A6A08828FF9F84FA78C0 Purpose of Expenditure Office Sought: House Category/ State: Television Advertising Type X Senate District:. President Name of Federal Candidate Supported or Opposed by Expenditure: Feingold, Russell, Dana,, Support Check One: Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 399390.78 2016 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination A&B Printing 2016 10 25 Mailing Address 2908 S Highland Drive, Ste B Amount State Zip Code City 1237.24 NV 89109-1059 Las Vegas Transaction ID: ADC575D9D91CC4FD4A49 Purpose of Expenditure Office Sought: **✗** House NV Category/ State: Walk Piece Production Type Senate 04 District: President Name of Federal Candidate Supported or Opposed by Expenditure: Kihuen, Ruben, , , **X** Support Check One: Oppose Disbursement For: 2016 Primary General Calendar Year-To-Date Per Election 48566.43 for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 402216.42 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)

# SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 6 OF 6 FOR LINE 7 OF FORM 5

AME OF FILER (In Full) HUMANE SOCIETY LEGISLATIVE FUND						
Total Name (Last First Middle Island) of De						
Full Name (Last, First, Middle Initial) of Pa	ıyee		Dat	te of Pub	olic Distribution/	Dissemination
Humane Society Legislative Fund				10	/ D D / 25	2016
Mailing Address 1255 23rd Street, NW Ste 455			Am	ount		
City	State	Zip Code		•		111111
Washington	DC	20037-1125	Tr	ansactio	on ID : A024AC	460.00 EC0B6EE4CB7A2
Purpose of Expenditure Staff time for Door-Knocking Campaign		Category/ Type	Office Sc	ought:	X House Senate	State: NJ District: 05
Name of Federal Candidate Supported or Gottheimer, Josh, , ,	Opposed by Expendi	ture:	Check O	ne:	President  Support	Oppose
Calendar Year-To-Date Per Election for Office Sought	1 1 7	47206.75	Disburser	2016	Primary	<b>x</b> General
Full Name (Last, First, Middle Initial) of Pa	ayee		Dat	te of Pub	olic Distribution/	/Dissemination
•	•			M = M		YYYYY
Mailing Address			Am	aunt	اللا	
City	State	Zip Code	Am	ount		
City	Glaic	Zip Oode			,,	
Purpose of Expenditure		Category/ Type	Office So	ought:	House Senate	State:
Name of Federal Candidate Supported or	Opposed by Expendi	ture:	Check O	ne:	President Support	District:
Calendar Year-To-Date Per Election for Office Sought			Disburser		Primary	General
Full Name (Last, First, Middle Initial) of Pa	avee		Dat		olic Distribution/	/Dissemination
,	,,			M M	/	YTYTYTY
Mailing Address						
			Am	ount		
City	State	Zip Code			<u>, , , , , , , , , , , , , , , , , , , </u>	
Purpose of Expenditure		Category/ Type	Office So	ught:	House Senate	State:
Name of Federal Candidate Supported or	Opposed by Expendi	ture:			President	District:
			Check O	ne:	Support	Oppose
Calendar Year-To-Date Per Election for Office Sought		7	Disburser		Primary	General
(a) SUBTOTAL of Itemized Independent Ex	cpenditures					460.00
(b) SUBTOTAL of Unitemized Independent	Expenditures		▶			
(c) TOTAL Independent Expenditures(carry total from last page forward			▶			513321.56